



TRANSMITTAL FORM

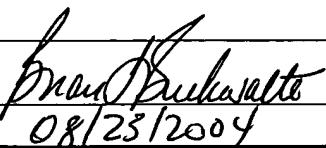
(to be used for all correspondence after initial filing)

		Application Number	10/807,993
		Filing Date	March 23, 2004
		First Named Inventor	James Patrick DUNN, et al
		Art Unit	Unassigned
		Examiner Name	Unassigned
Total Number of Pages in This Submission		Attorney Docket Number	R0169B-REG

ENCLOSURES (check all that apply)

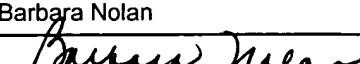
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <ul style="list-style-type: none"> International Search Report; IDS Form 1449; Copy of cited reference; Return Postcard. 	
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Remarks</td> </tr> </table> <p style="margin-top: 10px;">Applicants believe that no fees are due. However should this not be the case, the Commissioner is hereby authorized to charge any additional fees that may be required to Deposit Account No. 18-1700.</p>			Remarks
Remarks			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	ROCHE PALO ALTO LLC Patent Department, M/S A2-250 3431 Hillview Avenue, Palo Alto, CA 94304
Signature	Brian L. Buckwalter, Reg. No. 46,585  08/23/2004
Date	

CERTIFICATE OF MAILING OR FACSIMILE

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Typed or printed name	Barbara Nolan		
Signature		Date	August 23, 2004

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